

PTO/SB/122 (10-01)

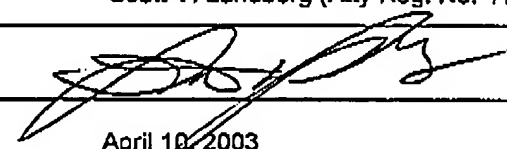
Approved for use through 10/31/2002. OMB 0851-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Application Number	10/033,156
	Filing Date	10/25/2001
	First Named Inventor	Beasom
	Art Unit	2811
	Examiner Name	Thomas J. Magee
	Attorney Docket Number	125,020US01

#3
CAD
J. McNeill
4/16/03

Please change the Correspondence Address for the above-identified application to:				
<input checked="" type="checkbox"/>	Customer Number	34206	Type Customer Number Here	
OR				
<input type="checkbox"/>	Firm or Individual Name			
Address				
Address				
City		State		ZIP
Country				
Telephone		Fax		
<p>This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).</p> <p>FAX RECEIVED</p> <p>APR 10 2003</p> <p>TECHNOLOGY CENTER 2800</p> <p>I am the :</p> <p><input type="checkbox"/> Applicant/Inventor.</p> <p><input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> Attorney or Agent of record.</p> <p><input type="checkbox"/> Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____</p> <p>Typed or Printed Name Scott V. Lundberg (Atty Reg. No. 41,958)</p> <p>Signature </p> <p>Date April 10, 2003</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below*.</p>				

Total of	forms are submitted.
----------	----------------------

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.